

Temporary B License

City of Milton Clerk

710 S. Janesville St. Milton, WI 53563 lschroeder@milton-wi.gov 608-868-6900

- Temporary Class "B" (beer) and "Class B" (wine) licenses are available to bona fide clubs, churches, Lodges/Societies, Veteran's Organizations, local chambers of commerce and similar civic or trade organizations, and Fair Associations **only**. Being a non-profit company is not enough.
- At least one licensed operator (bartender) must be present.
- o The fee is \$10 for beer and/or wine. If you have more than one day, they must be consecutive dates.
- This application must be submitted a minimum of 30 days in advance of the event (Sec. 14-315).
- o If your plans include using the street for your event, you will need a Street Use Permit and you must apply at least 30 days before your event.
- o Please contact the City Clerk for additional information.
- Other requirements are on the accompanying sheet. □ Attached

125.26(6), Wis. Stats.	cense to sell ferment		or similar gatherings under s. under s. 125.51(10), Wis. Stats.		
Organization Pick one: ☐ Bona fide Club ☐ Churc ☐ Chamber of Commerce or	•	☐ Veteran's Organization ade Organization	☐ Fair Association		
Organization Name:			Phone:		
Address:	Em	ail: W	'ebsite:		
Date organized: If a corporation, give date of incorporation:					
WI State Seller's Permit ID	:				
☐ We are not required to ho☐ We <i>have</i> been convicted of		e's permit pursuant to s. 77.54 pter 38.	(7m), Wis. Stats.		
Organization Officers	Name	Street Address	City, State, Zip Code		
President					
Vice President					
Treasurer					
Secretary					

Person in charge of event	Name	Phone	Email	
Event Name:	Event d	lates & time(s):		
Event Address:		Estimated Atte	endance:	
Event Address.		Estimated Atte	iluanice.	
		If <i>part</i> of building/prohich floor or rooms, what sect		
Explain the purpose and nat	ure of the event:			
Describe your planned meth	nod of crowd control:			
Describe your planned meth	nod of alcohol control:			
How many security persons	will you have on the licen	sed premise?		
Name and license number of	f licensed operator(s) servi	ing at this event:		
Name:		License Number:		
	License Number:			
Name:		License Number:		
Will an application for waiv Wholesaler who will supply		Yes □ No Quantiti	es ordered:	
Will food be served? ☐ Yes	□ No Will a tent !	oe used? □ Yes □ No		
Will the street be used? \Box Y	Yes \square No Will wine be served? \square No \square Yes: of 2 per year			
Declaration				
☐ The information provided	d in this application is true	and correct to the best of my	knowledge and belief.	
Authorized Signature		Date	e	
For Office Use Only:				
License Number:				
Director of Public Works		Milton Fire Department		
Police Chief		City Clerk		